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CONTACT: MARA LEE  
(202) 225-7163

**Matsui Fights for Protections in Affordable Care Act During Committee Meeting**

*Submits 3 Amendments That Would Protect Women, Children, Seniors, and Investments in Primary Care*

**WASHINGTON, D.C.** – Today, Congresswoman Doris O. Matsui (D-CA), a Member of the House Energy and Commerce Committee, submitted three amendments in the mark-up of a series of bills that would gut the Affordable Care Act. Together, the amendments would help protect our most at-risk populations: women, children, and seniors; and help protect investments in primary care that benefit all Americans.

In contrast, the bills brought forth by the Majority limit choice, limit access, and limit the quality of care for Americans across the country. The bills cut funding to states and localities that help them ensure better preventive care is present in their communities; cut programs aimed at helping provide low-income kids with long-overdue medical care; cut funding to medical students seeking careers in primary care; and cut funding to states to help establish more efficient health insurance marketplaces.

“The legislation brought forth by the Majority is irresponsible. They are simply trying to chip away at the consumer protections and delivery system reforms put in place by the Affordable Care Act,” Congresswoman Matsui stated. “It is my hope that the Members of this Committee reject these pieces of harmful legislation, and instead find a way that we can work together to better our health care delivery system in a meaningful and constructive manner.”

The first of Congresswoman Matsui’s amendments would not allow H.R.1213 to be enacted until all Americans have free preventive care, as will be the case when the health benefit exchanges go online in 2014. H.R. 1213, unamended, would repeal all federal funding to assist

the states with establishing health benefit exchanges if a state choose to do so.

The second Matsui Amendment would amend H.R.1217, To Repeal the Prevention and Public Health Fund, a bill which would prevent much needed and long overdue guaranteed funding from helping bolster primary and preventive care. The Matsui Amendment would not allow H.R. 1217 to be enacted until the Department of Health and Human Services (HHS) certifies a number of women's cancer benchmarks are met. Those benchmarks include:

- The annual death rate among females from breast cancer is not greater than .02 percent;
- The annual death rate among females from uterine cervix cancer is not greater than 0.002 percent;
- The annual rate among females of new cases of invasive uterine cancer is not greater than 0.007 percent; and
- The annual rate among females of new cases of late-stage breast cancer is not greater than .041 percent.

The final Matsui amendment would amend H.R. 1216, a bill convert the funding in ACA to graduate medical education in qualified teaching health centers from mandatory to discretionary. The Matsui Amendment would not allow H.R.1216 to be enacted until HHS certified that 95 percent of Americans persons, regardless of age, have access to a source of ongoing care; and that 100 percent of Americans over 65 have access to an ongoing source of care.

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